

State of Wisconsin  
Department of Natural Resources  
P.O. Box 7921,  
Madison WI 53707-7921  
dnr.wi.gov

**Notice of Intent**  
**Under the Actual Emission Exemption**  
**ss. NR 406.04(1q) or NR 407.03(1m), Wis. Adm. Code.**  
Optional form (revised 9/07)

**Notice:** By submitting this form you are notifying the department of your intent to (1) construct or modify an emission unit under s. 406.04(1q), Wis. Adm. Code, or (2) operate a facility under s. NR 407.03(1m), Wis. Adm. Code.

It is not the department's intention to use any personally identifiable information from this form for any other purpose. Wisconsin's Open Records law requires the department to provide this information to others upon request [ss. 19.31 - 19.69, Wis. Stats.]. Read instructions before completing this form.

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1. Facility name

mailing address Street or Route

City, State, Zip Code

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2. Facility location Street Address

City, County

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3. Responsible official Name

Title

Telephone

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4. Permit contact person Name

Title

Telephone

E-mail

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5. Facility identification number (FID):

6. SIGNATURE OF FACILITY REPRESENTATIVE

NOTICE OF INTENT check appropriate box

☐ I HEREBY NOTIFY THE DEPARTMENT OF THE INTENT TO CONSTRUCT UNDER THE ACTUAL EMISSIONS EXEMPTION UNDER S. NR 406.04(1q), WIS.ADM. CODE.

I have attached a complete application for or an application for revision of my air pollution control operation permit.

☐ I HEREBY NOTIFY THE DEPARTMENT OF THE INTENT TO OPERATE THIS FACILITY UNDER THE ACTUAL EMISSIONS EXEMPTION AS REQUIRED UNDER S. NR 407.03(1m), WIS. ADM. CODE.

By submitting this notification I understand that I am also requesting the following:

Revocation of all air pollution control construction and operation permits and orders issued to this facility.

Withdrawal of coverage of my facility from under a general or registration permit.

Withdrawal of any pending air pollution control permit applications submitted by the facility.

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Printed or Typed Name

Title

Signature

Date Signed

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Optional Form  
AIR POLLUTION CONTROL CONSTRUCTION AND OPERATION PERMIT  
AND ORDER REVOCATION APPLICATION FORM INSTRUCTIONS .

- Item 1 Provide full business name and address of corporation, company, association, society, firm, partnership, individual or political subdivision of the state submitting the application.
- Item 2 Street address where the air pollution sources are located.
- Item 3 The responsible official is a person legally responsible for the operation of the permitted air pollution sources. For a corporation, this person must be the president, vice-president, secretary or treasurer, or other person with a similar level of responsibility in the company. Subsection NR 400.02(80e), Wis. Adm. Code defines "responsible official."
- Item 4 List the name of the Individual to contact for additional information concerning the permits and/or orders during the revocation process.
- Item 5 Provide the facility identification (FID) number that appears on the annual emissions inventory reports.
- Item 6 Check the appropriate box. Note that your notification of intent to operation under 407.03(1m) is also considered a request of revocation of existing permits or, if appropriate, a request of withdrawal from coverage under a general or registration permits. Review the form, sign and date. Send the original plus one copy of the submittal to the department at the address below. Keep a copy for your records.

SEND THE ORIGINAL AND ONE COPY OF THIS COMPLETED FORM TO:  
WISCONSIN DEPARTMENT OF NATURAL RESOURCES  
BUREAU OF AIR MANAGEMENT  
AM/7 – ACTUAL EMISSION EXEMPTION  
P.O. BOX 7921  
MADISON, WI 53707-7921